

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF GEORGE A. JACKSON et al	COURT CASE NUMBER 05^{CV} 823 KAS
DEFENDANT STANLEY TAYLOR et al	TYPE OF PROCESS OIC
SERVE TONY FIGARIO, Department of Correction ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 245 MCKEE ROAD, DOVER, DE 19904	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW: <input type="checkbox"/> GEORGE A. JACKSON SUSSEX CORRECTIONAL INSTITUTION P.O. BOX 500 GEORGETOWN, DE 19947-0500	
Number of process to be served with this Form - 285 Number of parties to be served in this case Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):
Fold**PAUPER CASE**

Signature of Attorney or other Originator requesting service on behalf of: George A. Jackson	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER N/A	DATE 5/26/06
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No. _____	District to Serve No. _____	Signature of Authorized USMS Deputy or Clerk BF	Date 7-11-06
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☒ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.
Address (complete only if different than shown above)	Date of Service 7/25/06 Time _____ am _____ pm Signature of U.S. Marshal or Deputy BF

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS:

No longer employed @ D.A. County
Return Unexecuted

2006 JUL 26 AM 9:51
 U.S. DISTRICT COURT
 DISTRICT OF DELAWARE
 2006 JUL 26 A
 CLERK'S OFFICE